FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)

	Federal Agency and Organizational Element o Which Report is Submitted 2. Federal Grant or Other Identifying Number Assigned By Federal Agency					OMB Approval No. 0348-0038	Page of pages
3.	Recipient Organization (Name and complete add	dress, including ZIP code)					
4.	Employer Identification Number	5. Recipient Account Numb	per or Identifying Number	6. Final Report		7. Basis	Accrual
8.	Funding/Grant Period (See instructions) From: (Month, Day, Year) To: (Month, Day, Year)		Period Covered by this Report From: (Month, Day, Year)		,	To: (Month, Day, Year)	
10). Transactions:		l Previously Reported	II This Period		III Cumulative	
	a. Total outlays						0.00
	b. Recipient share of outlays					0.00	
	c. Federal share of outlays					0.00	
	d. Total unliquidated obligations						
	e. Recipient share of unliquidated obligations						
	f. Federal share of unliquidated obligations						
	g. Total Federal share(Sum of lines c and f)					0.00	
	h. Total Federal funds authorized for this fund						
	i. Unobligated balance of Federal funds/Line	h minus line g)					0.00
11	a. Type of Rate(<i>Place "X" in appropriete box</i>) 1. Indirect Provisional Pre		determined	☐ Final		Fixed	
	Expense b. Rate	c. Base	d. Total Amount		е.	Federal Share	
12	Remarks: Attach any explanations deemed no legislation.	posseary or information requi	red by Federal sponsoring	agency in comp	ollance vi	din governing	
1:	3. Certification: I certify to the best of my kno				t all out	lays and	
unliquidated obligations are for the purposes set forth in the award doc Typed or Printed Name and Title				Telephone (Area code, number and extension)			
Signature of Authorized Certifying Official				Date Report Submitted April 28, 2004			
'n	ISN 7540-01-218-4387	-202	Standard Form 269A (Rev. 7-97)				

Prescribed by OMB Circulars A-102 and A-110